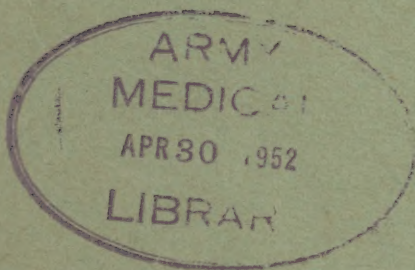


WI  
HO 539

ANNUAL REPORT  
OF THE PUBLIC HEALTH COMMITTEE  
CHAMBER OF COMMERCE OF HONOLULU  
1947



ESTABLISHED 1850



PUBLIC HEALTH COMMITTEE  
Honolulu, Hawaii, U. S. A.  
1947





1947

OFFICERS AND MEMBERS  
of the  
PUBLIC HEALTH COMMITTEE  
for the year  
1947

OFFICERS

FORREST J. PINKERTON, M.D.....*Chairman*  
LYLE G. PHILLIPS, M.D.....*Vice Chairman*  
R. G. NEBELUNG, DR. P.H.....*Executive Director and Secretary*

MEMBERS

Mrs. Thelma Akana	Uichi Kanayama
Ruth Ann Aust	Masatoshi Katagiri
Mrs. Edith Bennett	F. D. Lowry
O. J. Burnett	Malcolm MacNaughton
E. J. Burns	Howard D. Marley
H. S. Campbell	C. T. Oliphant
Reginald W. Carter	C. E. Pemberton
Charles F. Chillingworth	J. D. Pratt
Harry L. Dawson	Theodore R. Rhea
Carter Galt	William C. Rose
Neal Ifversen	Nicholas T. Teves
Paul A. Johnson	A. Leslie Vasconcellos, M.D.
	R. Allen Watkins

## TABLE OF CONTENTS

	PAGE
Preface . . . . .	4
Postwar Health Studies . . . . .	6
Public Medical Care Study . . . . .	7
Oahu Health Council . . . . .	8
The Health Story in Hawaii . . . . .	10
Honolulu Industrial Exposition . . . . .	12
School Health Education . . . . .	13
Practical Nurse Training Course . . . . .	13
Palama Settlement . . . . .	13
Cardiology Clinic . . . . .	14
Scholarships . . . . .	14
Staff Activities . . . . .	14
Conclusion . . . . .	15



## PREFACE

For many years the Chamber of Commerce of Honolulu has been offering practical and professional leadership in support of health work in the community. The history of its activity dates back to the early 1900's when the business interests first took an active part in a serious outbreak of plague in the city. Throughout its long history, the Chamber's public Health Committee has initiated numerous new projects in addition to assisting both official and voluntary health agencies in the furtherance of their work. Funds for support of these activities are obtained from the voluntary contributions of importers.

The Committee has concerned itself with meeting emergency health problems where government cannot function immediately or where funds from other sources are not available. It has also pioneered in the field of unmet community health needs through conduct of special demonstrations.

Business interest and support of both public and voluntary health programs are essential for development of balanced and comprehensive health programs. Also, there can be no dispute over the need to arouse in the individual an interest in the maintenance of his own personal health as well as that of his community.

R. G. NEBELUNG, DR. P.H.  
*Executive Director*  
*Public Health Committee*

## PUBLIC HEALTH COMMITTEE

Honolulu, Hawaii, January 20, 1948

MR. JOHN C. WALKER, *President*  
Chamber of Commerce of Honolulu

Sir:

This past year has been a very significant one for the Public Health Committee from the standpoint of achievement. Our work has been concerned with research, health education, and pioneering new activities in those areas where facilities have been lacking or existing machinery was unable to meet community needs.

We have dealt with emergency problems in addition to continuing our established policy of endeavoring to find a better means for solving those fundamental issues that constitute a threat to our health, social, and economic well-being.

The effective allocation of funds has never been an easy task. Basically, we desire, through the support of ideas, projects or men, to advance knowledge and understanding and thus indirectly to improve the health status of the community.

The wisdom with which the choice has been made is reflected in terms of the quality of our communal health. If the choice is a free one, there is the added obligation to support those worthy enterprises that, for one reason or other, are unable to obtain aid from any other source.

Except for emergency grants, our policy has been to study carefully and weigh all requests in terms of their importance to the entire community. Needs not yet widely recognized have had first claim on our resources. We have continued to aid both official and voluntary agencies in the furtherance of their work through the media of a professional staff and grants in aid.

Members of the committee have likewise rendered valuable assistance to these organizations by serving on their various boards and special committees. Much emphasis has been placed on fostering a spirit of cooperation and developing a coordinated approach in dealing with community problems. Our efforts in this field have been especially gratifying.

During these times our minds are disturbed by the changes taking place in our environment and way of life. These periods are always attended by much confusion because we must scrutinize carefully current procedures designed to meet better the needs of our changing social order, if we are going to preserve those established practices that have already proved their value to society. Our scope and concept of public health today is being enlarged considerably by the demands of a dynamic society for a higher



quality of individual and community health. This has made it necessary to examine the whole structure of curative medicines and public health, in order to determine what is the responsibility of the individual and what obligations the community should assume in matters pertaining to health. The task is a difficult one because many aspects of public health are uncharted and must out of necessity be of an empirical nature, especially in those areas where emphasis is placed upon maintenance and improvement of health. The inevitable cultural lag between what has already been discovered in the scientific field and the application of such knowledge is another factor that has made it difficult to supply all the immediate needs of the public. Consequently, we are confronted today with the problems of providing additional services to care for new needs and a public demand for more rapid expansion of all forms of health services. The economic implications are extremely important in such undertakings because their scope is defined by the willingness and ability of the public to pay for such services. Therefore, when wholesale extension of medical and hospital services is proposed, it is time to ask more critically than ever before whether these services are as nearly right for the functions they are intended to fulfill as hard, clear thinking can make them.

These are serious questions and they are not likely to be solved in financial terms alone or by any one agency, regardless of the resources it may possess. At present it is difficult to determine what form financial and administrative patterns will develop in the health service field. Progress must be based on increased knowledge which can only come from continued research and a constructive program of education built upon full appreciation of community limitations and needs.

### POSTWAR HEALTH STUDIES

For the past two and a half years the staff has been engaged in an overall study of community health problems in cooperation with other interested individuals and agencies. The project which was initiated by the Chamber of Commerce involved seventeen major committees and thirty-four special subcommittees. The staff has assisted the various committees in the collection, tabulation, and analysis of data in addition to assuming responsibility for preparation, editing and publication of all reports. Completion of this assignment has been an outstanding achievement because the health survey has provided us with a blueprint that can be used for some years to come by all agencies in the development of their programs. Wide recognition has come to Honolulu through publication of these studies. Many requests for copies have been received from mainland cities, national health organizations, foundations, universities, chambers of commerce and foreign countries. The reports have been compiled in a



series of eight volumes, four of which were completed in 1946. This year combined studies have been published in the fields of communicable disease control, medical services, maternal and child health, and specialized community health education programs. One thousand five hundred and sixty-five copies were distributed among individuals, organizations and institutions throughout the Territory, in mainland communities, and in foreign countries. During the past two years, 3,055 of these reports have been distributed. The demand has in every instance exhausted our supply. Study committee findings and recommendations have been publicized by the press.

### PUBLIC MEDICAL CARE STUDY

We were asked by the secretary of the Council of Social Agencies to undertake a study of the public medical care program operating under the Territorial Department of Public Welfare and to participate in any planning for proposed changes. This request was prompted by a recommendation made by a special committee of the American Association of Social Workers, Hawaii Chapter, that "a survey by an impartial, qualified person or group would be valuable as a basis for developing the program." In 1943, the Territorial Legislature passed Act 36 authorizing the participation of the Department of Public Welfare in financing the medical care program for indigents in the Territory. With the participation of the Department of Public Welfare in this field, inevitable problems and complexities arose in connection with the administration of the service. Accordingly, a study committee was established January 5, 1945. This action was initiated in an effort to eliminate some of the problems and to clarify other procedures associated with operation of the public medical care program.

Adhering to its long-established practice of collecting factual information on any health program before arriving at any conclusions or recommendations, the professional staff was assigned the task of assisting the study committee with its work. The committee met regularly throughout the study and rendered many valuable suggestions to the staff in the conduct of its work. Much credit is due particularly to Mr. C. T. Oliphant, chairman of this committee, for his many contributions and the manner in which he devoted himself to the completion of this undertaking. The study has provided for the first time a body of factual information on a program that was spending over one-half million dollars a year for care of the indigent sick in the Territory. It also offers an analysis of how existing inadequacies may be eliminated in the present system of providing medical care. The committee found that with the enactment of Act 36, Sec. 4828, R.L.H. 1943, divided authority exists in the administration of the indigent

medical care program. Previous legislation designating to the county responsibility for care of the indigent sick remains on the statutes and is still in force. The Department of Public Welfare was bearing the major expenditures but direction of the program remained largely at the county level. The Department of Public Welfare, City and County Health Department, and Territorial Board of Health are working in the same field, resulting in duplication, overlapping in administration, unnecessary costs and lack of efficiency in the conduct of program.

Following publication of the study, four of the committee's major recommendations have been adopted by the Territorial Department of Public Welfare. These include the following:

"That all Territorial Department of Public Welfare medical care programs be better coordinated and made more uniform in the interests of economy and greater efficiency.

"That a person qualified in the field of medical administration—preferably a physician—and additional trained medical social worker supervisory personnel be employed by the Department of Public Welfare to administer and direct all medical care programs financed by that department.

"That a medical advisory committee be appointed by the director of the Department of Public Welfare to assist the medical administrator of the Department of Public Welfare in the formulation of policies to be approved by the Advisory Board. Membership on this committee should include medical, dental, nursing, hospital, medical social work and lay personnel.

"That agreements concerning eligibility for tax-supported hospital care be developed through local conferences between public officials and representatives of hospitals and the medical profession."

Mr. C. T. Oliphant and Mr. Neal Ifversen now serve as representatives of the Public Health Committee on the Medical Advisory Committee of the Department of Public Welfare.

Three hundred and fifty copies of this report were published and distributed.

### OAHU HEALTH COUNCIL

The Oahu Health Council completed its second year of operation on October 2nd. Leadership, cooperation and teamwork are the essential ingredients in such an undertaking. Although the program is still in its developmental stages, sufficient progress has been made to indicate that lay persons not only are interested but eager to assume responsibility in health activities under professional direction. Our experience in this



activity has proved that money is merely a means to an end, not a method for accomplishment. The success or failure of our endeavor depends not on how much we have but how well we perform our tasks, the esteem in which it is held and the degree to which the public is willing to accept responsibility for this work. The term "public health" implies that the citizen has an individual and collective responsibility in the furtherance of community health.

This past year has been an important one in the growth and development of the Council as an organization dedicated to group planning for better community health. It has been especially gratifying to note the increase in membership attendance at meetings and active participation in Council affairs by both individuals and organizations. Current membership includes 108 delegates who represent 59 agencies, organizations and professional groups. Average attendance for the seven meetings held during the year was 125 persons. The Council has endeavored to interest itself in problems of special significance and to focus public attention on community needs and the necessity for greater support of existing programs. Many of the problems which confront us have long-term implications and must out of necessity be slowly and painstakingly worked out through co-operative action. It has assisted member agencies in the sponsorship of a school for practical nurse training, formation of a branch of the National Society for Crippled Children and Adults, and preparation of a health exhibit depicting the health story in Hawaii. It also assisted the Mental Hygiene Society in the preparation of a series of radio programs. Council services to the community have been expanded through our staff by preparation of materials, arranging meetings, consultations, conferences and publication of the *Oahu Health Council Bulletin* with a circulation of 1200 copies monthly.

The most outstanding contributions have been those splendid services rendered by numerous volunteers, who, in addition to representing the interests of their agencies, have given unsparingly of their time in the furtherance of our work.

On January 20th, Mr. Michael V. Shortley, director of the office of Vocational Rehabilitation, Federal Security Agency, Washington, D. C., and Mr. Lawrence Q. Lewis, assistant regional director of Region VII, San Francisco, California, outlined the economic significance of a vocational rehabilitation program for the Territory. At the March 10th meeting, Dr. Ferris F. Laune, secretary of the Honolulu Council of Social Agencies, Mr. Marshall McEuen, and Doctors Lyle G. Phillips and Harry L. Arnold, Jr., participated in a panel discussion on the subject of the proposed Hawaii compulsory health insurance program, Mr. Theodore R. Rhea acting as

moderator. On May 15th, Dr. Nils P. Larsen discussed the relation of tooth decay to diet and health, using slides to illustrate his study made of tooth decay in the Islands. At the June 30th meeting, Miss Helen Baukin, Director of Dental Hygiene, discussed dental programs in the Territory's public schools. An exhibit of dental health teaching aids was also prepared and displayed in the lobby of the Mabel Smyth Building on this occasion. At a special meeting on July 22nd, Sister Victoria Francis, Mr. Theodore R. Rhea, Dr. Arthur L. Dean, Mr. Carl Flath, Miss Mary M. Catton, Mrs. Mildred Pinner, Doctors Richard K. C. Lee, Grover A. Batten, Thomas Mossman, and Mr. Edward P. Toner participated in an open forum regarding the establishment of outpatient facilities in Honolulu hospitals. On August 18th, Doctors Barbara Ann Hewell and James Enright, Miss Betsy Boylin, Mrs. Celestine Barbour, Mrs. Kathleen Bialko, and Dr. J. E. Alicata participated in a panel discussion, "Is Your Child Ready for School?" Miss Eva Peyton served as moderator. At the September 15th meeting, "The Story Behind Your Community Chest" was presented under the direction of Reginald W. Carter. On October 27th, Mr. Paul B. Anderson, Dr. Pauline Stitt, Mrs. Margaret Hackfield and Mr. Ted Nobriga participated in a panel discussion featuring juvenile delinquency. At the December 8th meeting, the subject for discussion was public medical care. Dr. Pauline Stitt, Mr. Uichi Kanayama, Mr. Morris G. Fox, Miss Lulu Loo, and Captain Muriel Mitchell took part, with Mr. Kam Pui Lai serving as moderator.

Much recognition is due the Council's education committee and especially its chairman, Mrs. Allan J. McGuire, for her contributions. The group took an active part in the preparation of the "Health Story in Hawaii" project and presentation of four radio programs during the year. Mrs. John Wm. Devereux, chairman of the program committee, and her group have also rendered much valuable assistance in the preparation of successful Council programs. Mr. Charles Chillingworth, chairman of the legislative committee, and Mr. Paul Johnson have likewise been most helpful in the study of and furtherance of health legislation. These gentlemen and other members of their group reviewed and made recommendations to the Business Legislative Committee on 34 bills.

### THE HEALTH STORY IN HAWAII

One of our major accomplishments this year was the preparation of a health exhibit and booklet entitled *The Health Story in Hawaii*. This project represents the most outstanding piece of community health education ever undertaken in the history of this committee. It was developed at the request of the scientific exhibits committee of the American Public Health Association, who asked that Hawaii be represented at the 75th



annual meeting of the national association in Atlantic City. Mr. Elmer Anderson, representing the Territorial Board of Health, Mark Egan, Hawaii Visitors' Bureau, Milton Holst, Holst and Cummings Advertising Agency and Dr. Nils P. Larsen, Territorial Medical Society, were appointed to work out the details of the exhibit in cooperation with the staff under the co-chairmanship of Mrs. Allan McGuire of the Oahu Health Council and Mr. C. T. Oliphant of the Public Health Committee. This group deserves much commendation for their splendid achievement.

The purpose of the project was two-fold: to compile and present in a readable and understandable manner factual information on health in Hawaii and to acquaint people throughout the Territory and on the mainland with health activities in the Islands. In addition, it has proved to be an excellent publicity medium for the Territory and especially for the activities of the Honolulu Chamber of Commerce. The exhibit itself consists of a back wall of two large photo-murals showing Hawaiian scenes, with a large section of rare wood (monkeypod) in the middle and at both ends. The title, "Health Story in Hawaii," is sandblasted on the wood panel. A mechanical page turner approximately 2'x3' shows a series of 14 enlarged photo-murals depicting local health activities. The page turner is mounted on a table of monkeypod wood in the center of the booth.

The exhibit was displayed locally in the lobby of the Alexander Young Hotel, where it attracted considerable attention, before it was sent to Atlantic City. There were 250 scientific and technical exhibits at the meeting. Our exhibit again proved to be very popular and was acclaimed by attending delegates as being original and outstanding. It occupied one of the three choice locations in the convention hall. More than 4,000 visits were made to our booth. Visitors from 41 states, six foreign countries and two territories signed the register, including Canada, England, India, Mexico, Palestine, Peru, Puerto Rico and Alaska. Following the Atlantic City meeting the booth was shipped to Washington, D. C., where it was displayed in the health section of the Smithsonian Institute. It is now on exhibit in the Public Health Museum in Cleveland, Ohio. After completing a tour of selected mainland communities it will be used throughout the Territory. Favorable newspaper publicity has attended every showing on the mainland.

The other phase of the project consists of a colorful 4"x6", 111-page booklet which features approximately 50 photographs with descriptive copy of both general and health information in the Islands. The booklet has been recognized and acclaimed as being a "first" among health publications that give both factual and pictorial presentations of overall community health programs on a state or territorial level. Many flattering comments have

been received concerning the manner in which information is presented in the publication; and its value as an educational and publicity medium. Over seven thousand copies of the publication have been distributed in the Territory and on the mainland. One hundred and forty-two letters have also been received from prominent persons in business, industry, education, health and government, congratulating the committee on the quality of this project. The following comments are typical:

"May I on behalf of the professional men working for this company congratulate you and your committee on publishing one of the very finest booklets that has been made available to the public in many years. It not only conveys the health story in a very excellent manner but it also furnishes some of the real informative data that the people of Hawaii need."—C. E. Frowe, Castle and Cooke, Ltd.

"In behalf of the Hawaiian Pineapple Company I want to thank you for your excellent booklet. With your permission we would like to reprint some of the information you have collected in our company paper."—Calvin S. White, Director of Public Relations.

"I think credit is due the Committee in the editing and issuance of this very attractive story of the health program in Hawaii. We are forwarding these (copies) to Australia and New Zealand."—H. L. Dawson, Theo. H. Davies and Company, Ltd.

"It is easily one of the most effective presentations of its kind I have ever seen. I think it reflects great credit on all of those who are responsible for the publication and the splendid work that it so attractively presents."—J. R. Farrington, Delegate to Congress from Hawaii.

"The health story is developed as an integral part of the people's day to day life with no effort to propagandize. It is surprising to find how well the health record of these little islands compares with that of the (continental) United States. In most instances it is as good, and in many it is better . . . The story is of a people who have health problems peculiar to their own area and who have worked together to solve them."—*Hygeia*, January, 1948.

## HONOLULU INDUSTRIAL EXPOSITION

At the request of the Junior Chamber of Commerce a sum of \$270 was appropriated in February for booth space at the Industrial Exposition. A rodent control exhibit was prepared for the affair by our staff in co-operation with the Territorial Board of Health.



## **SCHOOL HEALTH EDUCATION**

On July 7, a grant of \$4,900 was approved for the continuation of the health education project at the University of Hawaii which the committee inaugurated in 1946. This gift has laid the foundation for meeting one of the basic community health needs, namely, improved physical and mental growth and development of our children through establishment of a teacher training health education professorship at the University of Hawaii. Under the leadership of Miss Georgia Hood, a mainland health education specialist, four health workshops were organized this year, two for Honolulu and rural Oahu teachers, one on Kauai and one on Molokai. Forty-nine teachers on Oahu, 29 on Kauai and 19 on Molokai—a total of 97 teachers in the Territory—enrolled in this work. Thirty-eight per cent of Molokai's teachers participated. The effect of these workshops has been pronounced. There is already evidence of greater emphasis upon health in our schools than ever before and, what is perhaps of even greater significance, a more intelligent approach to health instruction. Many principals and teachers who were privileged to participate in the program have written enthusiastic letters praising its results.

## **PRACTICAL NURSE TRAINING COURSE**

Many communities today are faced with lack of nursing personnel for care of the sick; also, the dilemma of how such services can be provided in a more economical manner. This situation is largely due to the demands of a growing population, enlarged public facilities, and programs for care of mental, tuberculous and other chronic forms of illness. In an effort to relieve this condition, a course for training practical nurses was established in the vocational guidance division of the Department of Public Instruction with our assistance. At the request of a special subcommittee of the Oahu Health Council, representing hospitals, nursing, medicine and the public, \$8,000 was appropriated for this activity, covering the biennium 1947-49. The school opened on October 20th, with an enrollment of twenty-two students. Three classes per year will be conducted with a maximum of twenty-five students in each. This facility will eventually make possible a greater degree of nursing care to the general public and a more economical type of service than has been previously available.

## **PALAMA SETTLEMENT**

Early in 1947, a grant of \$5,000 was made to Palama Settlement for the conduct of a health education service program for families living in that area. A number of social agencies had indicated their interest in an improved physical examination and health consultation service for the children under their care. Since Palama had been rendering a service of

this type to the social agencies in the community, it seemed logical that it should continue after the outpatient treatment services were transferred to local hospitals. The cost of operating this service was considerably reduced through a change in policy resulting from the inability to secure needed personnel. The results obtained in this modified program indicate that the demonstration should be continued next year, perhaps even on a more enlarged scale.

### **CARDIOLOGY CLINIC**

With the inauguration of outpatient facilities at St. Francis and The Queen's Hospitals for care of the indigent sick, it became apparent that certain essential facilities for the diagnosis of illness were lacking. Therefore, a request from St. Francis Hospital in the amount of \$3,000 was approved for purchase of a fluoroscope and electrocardiogram with special record charts. Heart disease is the leading cause of death today in the Territory. As the service expands, this modest investment can be expected to pay large dividends in the way of life conservation.

### **SCHOLARSHIPS**

At the August meeting, a scholarship in the amount of \$2,500 was approved for Mr. Francis Woo, chief of the Bureau of Housing, Territorial Board of Health, for one year's postgraduate study in the field of sanitary engineering at the University of Michigan. This request was supported by Dr. Charles L. Wilbar, Jr., president of the Board of Health, and Mr. A. S. Guild, director, Hawaii Housing Authority. Considerable sums of money are being expended every year by the various agencies in bringing trained mainland personnel to the Islands to fill positions in both private and official agencies. A large majority of these persons leave again at the end of a year, so there is a constant turnover of personnel. This situation retards the development of programs, and results in a needless expenditure of time and money in seeking replacements. Therefore, it would appear that the logical and most economical solution to this problem would be to train local individuals who will return here to live.

### **STAFF ACTIVITIES**

Staff activities were retarded considerably during the course of the year by the loss of personnel. Notwithstanding this fact, a splendid record of achievement has been accomplished. We operated without the services of a research statistician for six months, also those of a health educator for two months.

Miss Emily Hout, from the Oregon State System of Higher Education, accepted the position as secretary on July 11th. Miss Maxine Beeston, who was previously associated with the Virginia State Health Department,



became our health education specialist on August 1st. Mr. Robert C. Schmitt, formerly of the Cincinnati, Ohio, Planning Commission, joined the staff in a research capacity on August 8th.

The staff held 843 conferences, attended 220 meetings, prepared 96 news releases, four talks, four radio programs, nine special reports and 22 pieces of health material. They also participated in the following functions: Territorial Conference of Social Workers, Hawaii Public Health Association meeting, Western Branch and National meetings of the American Public Health Association, University of Hawaii school health workshop, and the in-service training program of the Board of Health. The executive director also gave a paper at the national meeting of the American Public Health Association in Atlantic City, entitled "Volunteer Participation in Community Health in Hawaii."\* This report will be published in the national journal in 1948. A previous address on "Community Education in Hawaii Through Health Surveys," appeared in the July 1947 issue of the *American Journal of Public Health*.\*\*

#### *Miscellaneous Activities*

In view of the fact that the mental hygiene program in the Territory was inaugurated by our Committee, financial assistance was given the Territorial Board of Health to bring Dr. J. G. Lynn IV to Hawaii as director of the Bureau of Mental Hygiene. The sum of \$1,500, requested by the Board of Health and the Mental Hygiene Society, was allotted to cover the cost of transporting Dr. Lynn and members of his family from New York City.

An amount of \$297.00 was allotted Palama Settlement to cover the cost of services rendered in connection with a survey to determine the geographic distribution of indigent patients receiving medical care at that institution.

Contributions of \$100 each were made to the Tuberculosis Association and the National Society for Crippled Children and Adults in connection with the furtherance of the health education activities of these organizations.

#### CONCLUSION

Fifteen meetings of the committee were held during the year. Your chairman would be remiss in his duty if he failed to acknowledge his sincere appreciation for the many contributions rendered by members of this splendid committee. He is particularly indebted to the Board of Directors of the Honolulu Chamber of Commerce, also the executive vice president and the other administrative officers of the Chamber for the generous

\* Public Health Education Section—October 10, 1947, Atlantic City, New Jersey.

\*\* Presented before the Public Health Education section of the American Public Health Association at the 74th annual meeting in Cleveland, Ohio, November 12, 1946.

manner in which they have supported our work. Your officers and staff have enjoyed the privilege of working for and with the various agencies in the community.

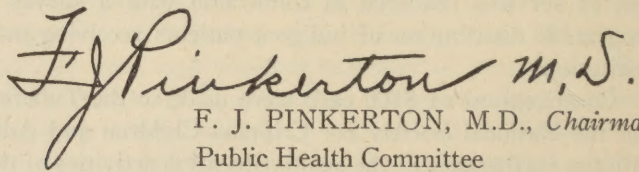
We are looking forward to the challenge of the years ahead with the confidence that, in cooperation with other agencies, we can make our community a still better place in which to live.

The committee has been very fortunate in obtaining the services of a competent, well-trained, experienced staff of public health people who are completely devoted to the furtherance of our work, each member having been selected on the basis of his or her own qualifications and training in a highly specialized field. Our past experience has made it possible to establish a program of procedure second to none in the country, and it is hoped that the basic formula already set up and operating efficiently will not become disorganized through shortsighted horizons of those untrained in this specialized field.

It is crystal clear to those of us who have already been closely connected with public health and allied fields that the future will present some particularly troublesome problems associated with medical care, hospital bed needs, and public welfare.

We trust that on the basis of our past experience we will be permitted to play a continuing useful role in helping to meet some of these problems that lie ahead.

Respectfully submitted,

A handwritten signature in dark ink, reading "F. J. Pinkerton M.D.". The signature is written in a cursive, flowing style. The "F" is large and loops around the "J". The "M.D." is written in a smaller, more formal script at the end of the signature.

F. J. PINKERTON, M.D., *Chairman*  
Public Health Committee  
Chamber of Commerce of Honolulu





NATIONAL LIBRARY OF MEDICINE



NLM 03940301 5